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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Utility Patent Application: Ms. Shirley DUSENBERRY

Application Number: 10/775,726

Art Unit 3632

Filed: Feb. 9, 2004

In Re: Office Action from Examiner Tan Le dated June 30, 2004

Transmitted by Rightfax to (703) 872-9306

REPLY AND AMENDMENT

Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

In compliance with the office action of June 30, 2004, please amend the above-identified application as indicated in Section 1 below, and consider the reply and arguments in Sections 2 and 3 below. A Remarks section is included at the end of this communication.

11/02/2004 AWONDAF1 00000116 10775726

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PTO/SB/21 (03-03)

Approved for use through 04/30/2003. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/775,726	
	Filing Date	02/09/2004	
	First Named Inventor	DUSENBERRY, Shirley	
	Art Unit	3632	
	Examiner Name	Le, Tan	
Total Number of Pages in This Submission	10	Attorney Docket Number	209.01-P-USA

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Michael A. Shippey	
Signature	<i>Michael A. Shippey</i>	
Date	11/01/2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>11/01/2004</u>		
Typed or printed	Michael A. Shippey	
Signature	<i>Michael A. Shippey</i>	Date <u>11/01/2004</u>

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